



EMBASSY OF ETHIOPIA
Diaspora and Consular Affairs
Tokyo, Japan

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RENEW/LOST/DAMAGE ETHIOPIAN ORIGIN ID REQUEST FORM

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☐ እድሳት
RENEW

☐ በጠፋ ምትክ
LOST

☐ በተበላሽ ምትክ
DAMAGE

PLEASE TYPE OR PRINT YOUR ANSWER IN THE SPACE PROVIDED BELOW EACH ITEM, FOR INSTRUCTION SEE THE REVERSE SIDE OF THIS FORM

1. TITLE/PREFIX	2. FIRST NAME	3. MIDDLE/FATHER NAME	4. GRAND FATHER NAME	PHOTO (2 PASSPORT SIZE)
5. SEX	6. OCCUPATION			
7. HEIGHT	8. COLOR OF EYES	9. COLOR OF HAIR	10. SPECIAL MARK	
11. COUNTRY OF BIRTH	12. PLACE OF BIRTH	13. NATIONALITY AT BIRTH	14. CURRENT NATIONALITY	
15. MAILING ADDRESS			16. COUNTRY	17. STATE
			18. CITY	19. ZIP CODE
20. DAYTIME PHONE	21. EVENING PHONE	22. FAX	23. EMAIL	
24. DOMICILE/COUNTRY OF RESIDENCE				

PASSPORT AND ORIGIN ID INFORMATION

DO NOT WRITE IN THIS SPACE
FOR OFFICIAL USE ONLY

PASSPORT INFORMATION (CURRENT NATIONALITY)		PREVIOUS ETHIOPIAN ORIGIN ID INFORMATION		REFERENCE NUMBER REPLACED ID NUMBER (IF ANY) RENEWED DATE VALID UNTIL FEE PAID RECEIPT NO
25.A. PASSPORT NUMBER		26.A. ETHIOPIAN ORIGIN ID NUMBER		
25.B. DATE OF ISSUE	25.C. VALID UNTIL	26.B. DATE OF ISSUE	26.C. VALID UNTIL	
25.D. PLACE OF ISSUE		26.D. PLACE OF ISSUE		
26.E. ISSUING COUNTRY		26.E. ISSUING COUNTRY		

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF

APPLICANT'S NAME: _____ SIGNATURE: _____ DATE: _____

IF THIS APPLICATION HAS BEEN PREPARED BY A TRAVEL AGENCY OR OTHER PERSON ON YOUR BEHALF, THE AGENT SHOULD INDICATE THE

NAME OF THE AGENCY OR PERSON, WITH APPROPRIATE SIGNATURE OF THE INDIVIDUAL PREPARED THIS FORM

NAME OF PERSON WHO PREPARED THIS FORM: _____ SIGNATURE: _____ DATE: _____

